

Fill in this information to identify the case:

6

Debtor 1 GARY S JENKINS

Debtor 2 DARLENE G JENKINS
(Spouse, if filing)

United States Bankruptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA

Case number 19-17647

Official Form 410S1**Notice of Mortgage Payment Change**

12/15

If the debtor's plan provides for payment of postpetition contractual installments on your claim secured by a security interest in the debtor's principal residence, you must use this form to give notice of any changes in the installment payment amount. File this form as a supplement to your proof of claim at least 21 days before the new payment amount is due. See Bankruptcy Rule 3002.1.

Name of creditor: Truist BankCourt claim no. (if known): 5

Last 4 digits of any number you use to identify the debtor's account: 3 0 5 8

Date of payment change:
Must be at least 21 days after date of this notice 03/30/2024

New total payment:
Principal, interest, and escrow, if any \$ 2046.45

Part 1: Escrow Account Payment Adjustment**1. Will there be a change in the debtor's escrow account payment?** No

Yes. Attach a copy of the escrow account statement prepared in a form consistent with applicable nonbankruptcy law. Describe the basis for the change. If a statement is not attached, explain why: _____

Current escrow payment: \$ _____

New escrow payment: \$ _____

Part 2: Mortgage Payment Adjustment**2. Will the debtor's principal and interest payment change based on an adjustment to the interest rate on the debtor's variable-rate account?** No

Yes. Attach a copy of the rate change notice prepared in a form consistent with applicable nonbankruptcy law. If a notice is not attached, explain why: _____

Current interest rate: _____ %

New interest rate: _____ %

Current principal and interest payment: \$ _____ New principal and interest payment: \$ _____

Part 3: Other Payment Change**3. Will there be a change in the debtor's mortgage payment for a reason not listed above?** No

Yes. Attach a copy of any documents describing the basis for the change, such as a repayment plan or loan modification agreement. (Court approval may be required before the payment change can take effect.)

Reason for change: Principal Plus InterestCurrent mortgage payment: \$ 2048.14New mortgage payment: \$ 2046.45

Debtor 1 GARY S JENKINS
First Name Middle Name Last Name

Case number (*if known*) 19-17647

Part 4: Sign Here

The person completing this Notice must sign it. Sign and print your name and your title, if any, and state your address and telephone number.

Check the appropriate box.

- I am the creditor.
 I am the creditor's authorized agent.

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

 /s/Melaney Cremony

Signature

Date 03/07/2024

Print: Melaney Cremony
First Name Middle Name Last Name

Title Bankruptcy Specialist

Company Truist Bank

Address Bankruptcy Dept, PO Box 85092, 306-40-06-10
Number Street

Richmond VA 23286
City State ZIP Code

Contact phone (800) 635-3112

Email DefaultBankruptcyManagement@Truist.com

CERTIFICATE OF SERVICE

I, Melaney Cremony, do hereby certify that a true and exact copy of the foregoing Notice of Mortgage Payment Change was served by United States mail and/or electronic filing, on 03/07/2024, addressed as follows:

Debtor:

GARY S JENKINS
DARLENE G JENKINS
491 W AVONDALE RD
WEST GROVE, PA 19390-9504

Debtor's Atty:

BRAD J SADEK
1315 WALNUT ST STE 502
PHILADELPHIA, PA 19107-4707

Trustee:

SCOTT WATERMAN
2901 ST. LAWRENCE AVE. SUITE
100 READING, PA 19606

/s/Melaney Cremony
Bankruptcy Specialist for Truist Bank

GARY S JENKINS
DO NOT MAIL - BANKRUPT

Loan Questions?
Call 1-844-487-8478

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<i>Account Status</i>	<i>Revolving Option</i>	<i>Total Outstanding Amount</i>		
Statement Date	03/05/24	\$230,693.17		
Line Account Number		\$10,605.85		
Due Date	03/30/24	03/30/24		
Current Amount Due	\$2,046.45			
Past Due Date	01/30/24			
Past Due Amount	\$3,836.49			
Fees/Charges	\$4,722.91			
Minimum Amount Due	\$10,605.85			
<i>Account Summary</i>				
Credit Limit	\$229,300.00			
Credit Available	\$0.00			
Previous Account Balance	\$231,324.12			
Total Payments ()	\$1,418.72			
Total Advances (+)	\$0.00			
Total Finance Charges (+)	\$787.77			
Total Adjustments (+)	\$0.00			
New Account Balance (=)	\$230,693.17			
Loans are subject to credit approval. Equal Housing Lender.  Member FDIC				
Annual Percentage Rate 4.25%	Daily Periodic Rate 0.011643%	Average Daily Balance \$225,518.09	Billing Cycle Days 30	Finance Charge \$787.77

Transaction History

Date	Description	Amount	Balance
02/05/24	BEGINNING PRINCIPAL BALANCE	\$0.00	\$225,811.75
01/31/24	INTEREST PAYMENT	\$318.72	\$225,811.75
	TRUSTEE PAYMENT		
02/21/24	PRINCIPAL PAYMENT	\$629.26	\$225,182.49
02/21/24	INTEREST PAYMENT	\$470.74	\$225,182.49
	09:16 02/21/2024 OLBWEB		
	LOAN/LINE PAYMENT FROM		
	DDA XXXXXXXXXXXXXXX37966		
03/05/24	TIER 1 CURRENT PER RATE .011643% CORR APR 04.25%		

Detach here and mail with your payment in the enclosed envelope. Make check payable to Truist. Be sure to include your loan account number on the check. Allow 7 days for postal delivery.

- *Check here if you prefer to have your payment drafted.
*Please provide details on back.

Payment Form

CLA

TRUIST ITEM PROCESSING CENTER
PO BOX 580048
CHARLOTTE NC 28258-0048

GARY S JENKINS

Account Number:

Payment Due Date: 03/30/24**Amount Due: \$10,605.85**Amount Enclosed 

Your ANNUAL PERCENTAGE RATE on page one is based on the interest rate plus the margin as set forth in your loan documents. The rate will be effective when the new statement cycle begins that month. The daily periodic rate disclosed on page one may vary from statement to statement due to changes in your annual percentage rate.

The TOTAL FINANCE CHARGE on page one is computed by multiplying the "average daily balance" by the daily periodic rate. Multiply this figure by the number of days in the billing cycle to calculate the finance charge for the billing cycle. To determine the "average daily balance" for your account, we take the beginning balance of your account each day and add any new advances and subtract any payments or credits. This gives us the daily balance. Then we add up all the daily balances for the billing cycle and divide the total by the number of days in the billing cycle. This gives us the "average daily balance".

Your NEW ACCOUNT BALANCE on page one does not include the repayment of closing costs paid on your behalf, if applicable, nor any other fees that may result upon closing this account.

Payments made in the branch or mailed to the address on this statement will be credited to your account on the date of receipt. Only checks or money orders should be sent by mail and accompanied by the account number or payment coupon. If the payment is \$5,000 or greater the availability of funds on the line of credit will not be made available until three business days from the receipt of payment.

When you provide a check as payment, you authorize us to use information from your check to make a one-time electronic fund transfer from your account. In certain circumstances, such as for technical or processing reasons, we may process your payment as a check transaction and funds may be processed from your account the same day.

Under the Fair and Accurate Credit Transactions Act, you are eligible for a free copy of your credit report each year. Contact:

Annual Credit Report Request Service P.O. Box 105281 Atlanta, GA 30348-5281 www.annualcreditreport.com 1-877-322-8228

If you notice inaccuracies on your credit report, please write to us at Truist Loan Services, Credit Bureau Disputes, PO Box 849, Wilson, NC 27894.

Convenient Ways To Reach Us

<ul style="list-style-type: none"> • Visit us online at Truist.com. • Stop by your local Truist branch. • If you have questions about your loan statement, write to us at: Truist Loan Services P.O. Box 2306 Wilson, NC 27894-2306 	<p>For information about your line 24 hours a day, call 844-4TRUIST (844-487-8478). Simply follow the prompts and utilize the automated system to access your account, make a payment, or take an advance.</p> <ul style="list-style-type: none"> • Enter your Social Security number or Taxpayer Identification number. • Enter your 14-digit Truist Line Account Number, followed by the pound (#) key.
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Billing Rights Summary In case of Errors, Inquiries, or Disputed Items Related to Your Account Statement.

If you think your line of credit statement is wrong, or if you need more information concerning a transaction or if you dispute an amount owed on your statement, please write us on a separate sheet at the following address: Truist Loan Services, P.O. Box 2306, Wilson, NC 27894. We must hear from you no later than 60 days after we sent you the first statement on which the error or problem appeared. You can telephone us, but doing so will not preserve your rights.

In the letter, give us the following information:

- Name and Account Number
- The dollar amount of the suspected error
- A description of the error and why you believe there is an error. If you need more information, please describe the item you are unsure about.

You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your statement that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

The bank will not accept any payment marked "Payment in Full" as to a disputed account and reserves the right to reject all such payments. The envelope and any enclosed documents related to a disputed account are to be marked "Attention Disputed Payoff."

Automatic Payment Authorization

Your signature authorizes Truist Bank to automatically debit the checking or savings account listed below for the amount of your loan payment each month. You will be notified by mail when your authorization has been received. Until that time, you are responsible for continuing to make your regular payments. Your authorization will remain in place until a written notice is received from you to cancel automatic payments.

Checking or Savings Account Number to Draft _____ Check One: Checking Savings

Financial Institution to Draft _____ Financial Institution's Transit Routing Number _____

Date _____ Signature of Account Holder _____

Include a blank voided check (for checking accounts) or a voided deposit slip (for savings accounts).

Change of address

If you need to change your address, please visit your local Truist branch or call Truist Client Care at 844-4TRUIST (844-487-8478).

GARY S JENKINS
DO NOT MAIL - BANKRUPT

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Transaction History

Date	Description	Amount	Balance
03/05/24	ENDING PRINCIPAL BALANCE INTEREST PAID IN 2023	\$0.00 \$9,675.85	\$225,182.49 \$0.00